DWS-U1 Form 1D Rev. 5/01

Utah Department of Workforce Services Unemployment Insurance 140 East 300 South

Unemployment Insurance 140 East 300 South P.O. Box 45288 Salt Lake City, Utah 84145-0288 TEL (801) 526-9400 FAX (801) 526-9377



DOMESTIC EMPLOYMENT STATUS REPORT READ INSTRUCTIONS ON REVERSE SIDE THEN COMPLETE ALL ITEMS

Type of Ownership □ Private	Home			
2. Corporation, trade or business nar	me and mailing address for qua	arterly contribution (tax) re	ports: 4. Federal Employee Ide	entification Number (FEIN):
	5 N I	· · · ·	5. County in Utah where principal activity is located:	6. Number of permanent worksites employing domestic help:
3. Telephone Number: ()	Fax Number:	,		<u> </u>
7. Mailing address for Wage and Se Requests (if different from item 2		ss of principal permaner (if different from items 2,		f business headquarters item 2):
10. List sole proprietor, general par				
Name	SSN	Title	Home/Address	Home Phone
				()
				()
				()
11. Describe in detail the type of do	mestic employment: (see inst	ructions on reverse side	12. Date of firs	t payment of wages in Utah:
READ INSTRUCTIONS ON THE R 13. Did you acquire the organization Type of acquisition: □ Change □ Sale, lease or sub-lease □	n, trade, or business of another of ownership Merger or	er operator? Yes [reorganization	□ No	
13a. Name, address and UI accoun	t number (if available) of prev	ious owner (predecessor		
		#	Date acqu	
13b. Did you acquire all or a portion				han 90%
13c. Did you retain all of the predec	essor's employees? Yes	i □ No Da	te acquired	
13d. Is your predecessor still in bus				
13e. Was predecessor's business of			closed	
14. Enter below the amount of wag				
Current	Jan. 1 to Mar. 31	Apr. 1 to Jun. 30	Jul. 1 to Sep. 30	Oct. 1 to Dec. 31
Year:				
Preceding				
Year:				
15. If you have not paid wages, do 16. Are you an employer in a busing ☐ Yes ☐ No	ess activity? Name of busin	ess		
			r	
	·			
I certify that the information cont	ained in this report is true a	nd correct.		
Nama		itlo	Tolonhana Nivert	Data Data
Name	I	tle	Telephone Numb	er Date

INSTRUCTIONS

The Utah Employment Security Act provides that the Department of Workforce Services must determine the status of each business and each person independently established in a trade, occupation, or profession. This report is to be completed immediately and returned to P.O. Box 45288, Salt Lake City, Utah 84145-0288.

All items must be completed. If an item does not apply to your business, enter N/A (Not Applicable).

Except as indicated below, all items are self-explanatory:

- **ITEM 2**: If you have more than one trade name or business name, also list the name or names by which your company is best known by the public.
- **ITEM 7**: Address of agent or office able to provide wage data, weeks of employment and other information about employees separated from your employment, if different from item 2.
- ITEM 8: If there is more than one permanent work site, please attach a separate sheet listing the name, address and telephone number of each site.
- **ITEM 11**: Please describe your primary domestic activity, whether you are a private household employing domestic help, child care services, in-home nursing services; a fraternity or sorority or some other type of domestic activity.
- **ITEM 12**: The definition of wages is currently defined by Section 3306(b), of the Internal Revenue Code of 1986, with modifications, subtractions, and adjustments provided in Section 35A-4-208 Subsections (2), (3), and (4), of the Utah Employment Security Act with regard to how the wage base is determined. Wages means all remuneration for employment including commissions, bonuses, **salaries or draws to corporate officers**, tips and the cash value of all remuneration in any medium other than cash.

Wages in Item 12 refers only to wages for employment covered by the Employment Security Act. Under the Act wages paid for services performed by a **sole proprietor's** spouse, parents or children under the age of 21 are **not** wages for unemployment. Wages paid to the entity owner (i.e. sole proprietor, partners and LLC members) are not wages for unemployment.

- ITEM 13: If you acquired (in whole or part) the business activity previously conducted by another entity, or if the business entity has changed (for example, from a proprietorship to a corporation, even if the owners are still principally the same) please complete Items 13-13e. "Acquired" means to have obtained the use of the business or assets through any legal means. It is not necessary to purchase the assets in order to have acquired them, nor is it necessary for your predecessor to have actually owned the business or assets for you to have acquired the business or assets from him. An acquisition can include change in the form of ownership, inheritance, repossession, foreclosure, gift, sale or lease.
- ITEM 14: A domestic employer is subject if, during any calendar quarter in the current or preceding calendar year, you paid cash remuneration of \$1,000 or more. In completing item 14, please provide only the amount of cash remuneration and not the value of non cash remuneration such as meals and lodging provided by you, the employer. (The non cash remuneration may be deemed a wage when filing Employer's Quarterly Contribution Report, but is not considered when calculating whether you as an employer have reached \$1,000 in a calendar quarter.)

If additional information is needed, please call 801-526-9400 or 1-800-222-2857 ext. 9400 (Instate toll free number). Fax 801-526-9377.